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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/809,322
		Filing Date	March 26, 2004
		First Named Inventor	Yoji HATA
		Art Unit	2812
		Examiner Name	Andre C. Stevenson
Total Number of Pages in This Submission		Attorney Docket Number	037133.53131US

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	1. Response to Restriction Requirement
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	2. Postcard
<input type="checkbox"/> Certified Copy of Priority Documents	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	CROWELL & MORING LLP		
Signature			
Printed Name	Robert L. Grabarek, Jr.		
Date	March 30, 2006	Reg. No.	40,625

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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	March 30, 2006

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 10/809,322 Confirmation No. 8225
Applicant : Yoji HATA
Filed : March 26, 2004
TC/A.U. : 2812
Examiner : Andre C. Stevenson

Docket No. : 037133.53131US
Customer No. : 23911

RESPONSE TO RESTRICTION REQUIREMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Restriction Requirement mailed February 28, 2006, Applicant elects the invention of Group II, i.e., claims 3-5, for further prosecution in the above-referenced patent application.

Applicant does not believe that any fees are required in connection with this Response, however, the Office is authorized to charge any fees required to Deposit Account No. 05-1323 (Docket 037133.53131US). Should the Examiner have any questions concerning this Response, the Examiner is invited to contact the undersigned to expedite prosecution of this application.